

## Request for Voluntary Payment of Long Term Disability Insurance Premiums

From: \_\_\_\_\_ SocSec #: \_\_\_\_\_  
Please print First Name, Middle Initial, Last Name

To: Human Resources, Rice University

Subject: Request to Pay for Long Term Disability Insurance by Salary Deduction

I request that Rice University deduct from my salary, on an after-tax basis, the amount necessary to pay the Long Term Disability Insurance premium, commencing (date) \_\_\_\_\_. It is my understanding that if the long-term disability premiums are paid directly by the employee in after-tax dollars, any disability benefits received from the long term disability plan would not be considered taxable income under current IRS regulations. If the premium continues to be paid by Rice, any disability benefits from the policy will be taxable.

I understand that in signing this I agree to the following:

- 1) Rice University would normally pay this premium and will continue to do so if I do not elect to pay this premium voluntarily;
- 2) Rice University has not encouraged me to pay this premium from my salary, but is permitting such payment at the request of certain faculty and staff;
- 3) I understand that my election to pay the premiums gives me no special standing under the terms of the policy, other than a possible tax advantage;
- 4) I have sought out independent information on possible tax implications of my election to pay this premium; and,
- 5) I understand that I will not be permitted to revoke or change this election during the term of the fiscal year for which the election is made, unless by termination of employment.

*All staff and faculty considering this election are encouraged to review the LTD policy, the costs, and their individual circumstances carefully.*

Having read the above, I still request that Rice University deduct the premium amount commencing (date) \_\_\_\_\_ and continuing for the balance of the fiscal year.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date